

For the year Jan. 1–Dec. 31, 20XX, or other tax year beginning , 20XX, ending , 20

See separate instructions.

Your first name and middle initial: James; Last name: King; Your social security number: XXX XX XXXX; Spouse's social security number:

Home address (number and street): 681 West 1st Street; Apt. no.: ; City, town, or post office: Center Town; State: US; ZIP code: 10021; Foreign country name: ; Foreign province/state/county: ; Foreign postal code: ; Presidential Election Campaign: [X] You [] Spouse

Filing Status: [X] Single; [] Married filing jointly; [] Married filing separately; [] Head of household (HOH); [] Qualifying surviving spouse (QSS); If you checked the MFS box, enter the name of your spouse:

Digital Assets: At any time during 20XX, did you: (a) receive (as a reward, award, or payment for property or services); or (b) sell, exchange, or otherwise dispose of a digital asset? [] Yes [] No

Standard Deduction: [] Spouse itemizes on a separate return or you were a dual-status alien; Someone can claim: [X] You as a dependent [] Your spouse as a dependent

Age/Blindness: You: [] Were born before January 2, 1959 [] Are blind; Spouse: [] Was born before January 2, 1959 [] Is blind

Table with 6 columns: (1) First name, Last name, (2) Social security number, (3) Relationship to you, (4) Child tax credit, Credit for other dependents. Includes instructions for dependents.

Income section table with rows 1a through 1z. Includes instructions: Attach Form(s) W-2 here. Also attach Forms W-2G and 1099-R if tax was withheld.

Table with rows 2a through 6b. Includes instructions: Attach Sch. B if required.

Table with rows 7 through 15. Includes instructions: Standard Deduction for: • Single or Married filing separately, \$13,850; • Married filing jointly or Qualifying surviving spouse, \$27,700; • Head of household, \$20,800.

Tax and Credits	16	Tax (see instructions). Check if any from Form(s): 1 <input type="checkbox"/> 8814 2 <input type="checkbox"/> 4972 3 <input type="checkbox"/> _____	16	0
	17	Amount from Schedule 2, line 3	17	
	18	Add lines 16 and 17	18	
	19	Child tax credit or credit for other dependents from Schedule 8812	19	
	20	Amount from Schedule 3, line 8	20	
	21	Add lines 19 and 20	21	
	22	Subtract line 21 from line 18. If zero or less, enter -0-	22	
	23	Other taxes, including self-employment tax, from Schedule 2, line 21	23	171
	24	Add lines 22 and 23. This is your total tax	24	171

Payments	25	Federal income tax withheld from:		
	a	Form(s) W-2	25a	
	b	Form(s) 1099	25b	
	c	Other forms (see instructions)	25c	
	d	Add lines 25a through 25c	25d	
	26	2023 estimated tax payments and amount applied from 2022 return	26	
	27	Earned income credit (EIC)	27	
	28	Additional child tax credit from Schedule 8812	28	
	29	American opportunity credit from Form 8863, line 8	29	
	30	Reserved for future use	30	
31	Amount from Schedule 3, line 15	31		
32	Add lines 27, 28, 29, and 31. These are your total other payments and refundable credits	32		
33	Add lines 25d, 26, and 32. These are your total payments	33	0	

Refund	34	If line 33 is more than line 24, subtract line 24 from line 33. This is the amount you overpaid	34	
	35a	Amount of line 34 you want refunded to you . If Form 8888 is attached, check here <input type="checkbox"/>	35a	
	b	Routing number: _____ c Type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings		
	d	Account number: _____		
36	Amount of line 34 you want applied to your 20XX estimated tax	36		

Amount You Owe	37	Subtract line 33 from line 24. This is the amount you owe . For details on how to pay, go to www.irs.gov/Payments or see instructions.	37	171
	38	Estimated tax penalty (see instructions)	38	

Third Party Designee Do you want to allow another person to discuss this return with the IRS? See instructions **Yes**. Complete below. **No**

Designee's name _____ Phone no. _____ Personal identification number (PIN) _____

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature	Date	Your occupation	If the IRS sent you an Identity Protection PIN, enter it here (see inst.) _____
Spouse's signature. If a joint return, both must sign.	Date	Spouse's occupation	If the IRS sent your spouse an Identity Protection PIN, enter it here (see inst.) _____
Phone no.	Email address		

Paid Preparer Use Only

Preparer's name	Preparer's signature	Date	PTIN	Check if: <input type="checkbox"/> Self-employed
Firm's name	Firm's address			Phone no.
Firm's address				Firm's EIN